



PATENT
Customer No. 22,852
Attorney Docket No. 06530.0317

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
)
Malka BERNDT) Group Art Unit: 3739
)
Application No.: 10/720,190) Examiner: TOY, ALEX B
)
Filed: November 25, 2003)
)
For: MEDICAL DEVICE WITH VISUAL) Confirmation No.: 4220
INDICATOR AND RELATED)
METHODS OF USE)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

TRANSMITTAL LETTER

We enclose an Amendment in reply to an Office Action mailed November 13, 2006. The additional claims fee is calculated as follows:

| | Claims Remaining After Amendment | | Highest Number Previously Paid | Present Extra | Rate | Additional Fee |
|---|-------------------------------------|---|-----------------------------------|------------------|---------|-------------------|
| Total | 47 | - | 58 | 0 | x \$ 50 | \$ 0.00 |
| Indep. | 6 | - | 5 | 1 | x \$200 | 200.00 |
| <input type="checkbox"/> First Presentation of Multiple Dep. Claim(s) | | | | | +\$360 | 0.00 |
| Subtotal | | | | | | \$ 200.00 |
| Reduction by 1/2 if small entity | | | | | | - 0.00 |
| TOTAL | | | | | | \$ 200.00 |

A check for \$320.00 to cover the \$200.00 additional claims fee and \$120.00 extension fee is enclosed.

Please grant any extensions of time required to enter this Amendment and charge any additional required fees to Deposit Account No. 06-0916.

Dated: February 21, 2007

By: 

Michael W. Kim
Reg. No. 51,880